

## **DECLARATION - Utility or Design Patent Application** I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below. Filing Date (MM/DD/YYYY) Application Number(s) Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application: Filing Date Status Application Serial No. Patented Patented Patented I hereby appoint: Place Customer Practitioners at Customer Number 000027777 Number Bar Code Label Here AND Practitioner(s) named below: Registration Number Name as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Address all telephone calls to Timothy E. Tracy at telephone number (732) 524-6586. **Customer Number** Direct all correspondence to: or Bar Code Label 000027777 Correspondence address below Name: Address: Address: ZIP City: State: Country Telephone: Fax:

information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor Christopher **Family Name** Given Name (first and middle [if any]) Chrisotpher E. or Surname Szymczak Inventor's Signature Residence: City Marlton State N. **Country USA Citizenship USA** Mailing Address 79 Colts Gait Road **ZIP** 08053 State NJ **Country USA** I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor Given Name **Family Name** (first and middle [if any]) James T. or Surname Walter Inventor/s 12/3/01 Signature Date Citizenship USA Residence: City Ambler State PA **Country USA** Mailing Address 220 Hendricks Street **ZIP** 19002 **Country USA** Ambler State PA I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF THIRD INVENTOR: A petition has been filed for this unsigned inventor Given Name **Family Name** (first and middle [if any]) or Surname Inventor's Signature Date Residence: City State Citizenship Country **Mailing Address** ZIP State Country City

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on

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Approved for use through 10/31/2002. OMB 0551-0032

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DECL	ARATION	Attorney Dod	cket Number	MCP-284						
POWER (	AND OF ATTORNEY	First Named	Inventor	SZYMCZAK et al.						
FOR UTIL	TY OR DESIGN		COMPLETE IF KNOWN							
	APPLICATION CFR 1.63)	ırcharge	Application N	Number	09/966,441					
Declaration Submitted with Initial Filing	OR Initial Filing (Su		Filing Date	_	09/28/2001					
	(37 CFR 1.16(e))		Group Art U	nit	1616					
	·	Examiner Name		N/A						
As a below named inventor	, I hereby declare that	<b>:</b>								
My residence, mailing address, and citizenship are as stated below next to my name.  I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:										
SIMETHICONE SOLID ORAL DOSAGE FORM (Title of the Invention)										
the specification of which										
is attached hereto										
OR .										
was filed on 09/28/2001 as United States Application Number or PCT International Application Number 09/966,441										
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.										
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.										
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.										
Prior Foreign Application Number(s)	Country		Filing Date D/YYYY)	Priority Not Claime	Certified Copy Attached? YES NO					
Additional foreign applic	ation numbers are liste	d on a suppl	emental priori	y data sheet P	TO/SB/02B attached hereto:					